

GP 2811

PTO/SB/21 (12/97)
Approved for use through 9/30/2000. OMB 0651-0031
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE
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TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>	Application No.	09/473,394	
	Filing Date	December 28, 1999	
	First Named Inventor	Kaizad R. Mistry	
	Group Art Unit	2811	
	Examiner Name	Kang, D.	
Total Number of Pages in This Submission	5	Attorney Docket Number	42390P6892

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Response <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition <input type="checkbox"/> To Convert a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Small Entity Statement <input type="checkbox"/> Request for Refund	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Additional Enclosure(s) (please identify below): <div style="border: 1px solid black; height: 80px; width: 100%;"></div>
Remarks		

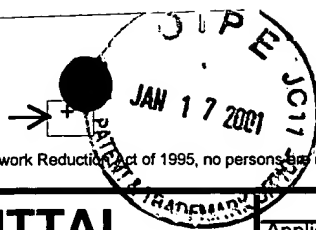
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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Donna Jo Coningsby, Reg. No. 41,684 BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN LLP
Signature	<i>Donna Jo Coningsby</i>
Date	January 10, 2001

CERTIFICATE OF MAILING/TRANSMISSION			
I hereby certify that this correspondence is being deposited with the United States Postal Service as First Class mail with sufficient postage in an envelope addressed to: Assistant Commissioner for Patents, Washington, D.C. 20231 on: January 10, 2001			
Typed or printed name	Mark W. Baugher		
Signature	<i>Mark W. Baugher</i>	Date	January 10, 2001

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PTO/SB/17 (12/99)

Approved for use through 09/30/2000. OMB 0651-0032

Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

FEE TRANSMITTAL for FY 2000

Patent fees are subject to annual revision.

Complete if Known

TOTAL AMOUNT OF PAYMENT (\$) 110.00

Application No.	09/473,394
Filing Date	December 28, 1999
First Named Inventor	Kaizad R. Mistry
Examiner Name	Kang, D.
Group/Art Unit	2811
Attorney Docket No.	42390P6892

METHOD OF PAYMENT (check one)

1. ☒ The Commissioner is hereby authorized to credit any overpayments to:

Deposit Account Number 02-2666
Deposit Account Name Blakely, Sokoloff, Taylor & Zafman LLP

☒ Charge Any Additional Fee(s) Required Under 37 CFR §§ 1.16, 1.17, 1.18 and 1.20.

☐ Applicant claims small entity status. See 37 CFR 1.27.

2. ☒ Payment Enclosed:

☒ Check ☐ Credit card ☐ Money Order ☐ Other

FEE CALCULATION

1. BASIC FILING FEE

Large Entity	Small Entity	Fee Description	Fee Paid
Fee Code	Fee Code		
101 710	201 355	Utility filing fee	
106 320	206 160	Design filing fee	
107 490	207 245	Plant filing fee	
108 710	208 355	Reissue filing fee	
114 150	214 75	Provisional filing fee	

SUBTOTAL (1) (\$)

2. EXTRA CLAIM FEES

Total Claims	Extra Claims	Fee from below	Fee Paid
9	22	18.00	0
3	6	80.00	
Multiple Dependent			

**or number previously paid, if greater, For Reissues, see below

Large Entity	Small Entity	Fee Description
Fee Code	Fee Code	
103 18	203 9	Claims in excess of 20
102 80	202 40	Independent claims in excess of 3
104 260	204 135	Multiple Dependent claim, if not paid
109 80	209 40	**Reissue independent claims over original patent
110 18	210 9	**Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) (\$)

FEE CALCULATION (continued)

3. ADDITIONAL FEE

Large Entity	Small Entity	Fee Description	Fee Paid
Fee Code	Fee Code		
105 130	205 65	Surcharge - late filing fee or oath	
127 50	227 25	Surcharge - late provisional filing fee or cover sheet.	
139 130	139 130	Non-English specification	
147 2,520	147 2,520	For filing a request for reexamination	
112 920*	112 920*	*Requesting publication of SIR prior to Examiner action	
113 1,840*	113 1,840*	*Requesting publication of SIR after Examiner action	
115 110	215 55	Extension for response within first month	110.00
116 390	216 195	Extension for response within second month	
117 890	217 445	Extension for response within third month	
118 1,390	218 695	Extension for response within fourth month	
128 1,890	228 945	Extension for response within fifth month	
119 310	219 155	Notice of Appeal	
120 310	220 155	Filing a brief in support of an appeal	
121 270	221 135	Request for oral hearing	
138 1,510	138 1,510	Petition to institute a public use proceeding	
140 110	240 55	Petition to revive - unavoidable	
141 1,240	241 620	Petition to revive - unintentional	
142 1,240	242 620	Utility issue fee (or reissue)	
143 440	243 220	Design issue fee	
144 600	244 300	Plant issue fee	
122 130	122 130	Petitions to the Commissioner	
123 130	123 130	Petitions related to provisional applications	
126 180	126 180	Submission of Information Disclosure Stmt	
581 40	581 40	Recording each patent assignment per property (times number of properties)	
146 710	246 355	Filing a submission after final rejection (37 CFR 1.129(a))	
149 710	249 355	For each additional invention to be examined (37 CFR 1.129(b))	
179 710	279 355	Request for Continued Examination (RCE)	
169 900	169 900	Request for expedited examination of a design application	

Other fee (specify)

Other fee (specify)

* Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$)

110.00

SUBMITTED BY

Complete (if applicable)

Name (Print/Type)	Donna Jo Coningsby	Registration No. (Attorney/Agent)	41,684	Telephone	(503) 684-6200
Signature	<i>Donna Jo Coningsby</i>	Date	01/10/01		

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